

Practitioner's Docket No. BA4-079  
Battelle Memorial Institute

**PATENT**

#131 Reg for  
Refund  
02-21-02

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Tonkyn, Russell, et al

Application No.: 09/960,124      Group No.: 1754  
Filed: 09/21/01      Examiner: Unknown  
For: No<sub>x</sub> Reduction Methods & Apparatuses

**Assistant Commissioner for Patents  
Washington, D.C. 20231**

**ATTENTION: Refund Section, Accounting Division, Office of Finance**

**REQUEST FOR REFUND  
(37 C.F.R. 1.28(a))**

**I. SUBMISSION OF SMALL ENTITY STATEMENT**

Attached is a statement claiming small entity status in this application.

**II. REFUND REQUEST**

This request for refund is made within three months, in accordance with 37 C.F.R. section 1.28, of the date a fee was paid in this application on September 21, 2001, in the amount of \$ 1,186.00.

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**CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8(a))**

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

**FACSIMILE**

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
(type or print name of person certifying)

**III. FEES PAID FOR WHICH REFUND REQUESTED AMOUNT OF REFUND REQUESTED**

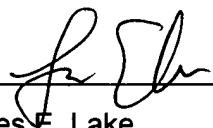
Filing fee	\$355.00
Independent Claims in excess of three	\$ 40.00
Total Claims in excess of twenty	\$198.00

**TOTAL REFUND REQUESTED \$593.00**

**IV. MANNER OF REFUND**

Please make refund by crediting Account No. 23-0925.

Date: 21 Dec 2001

  
\_\_\_\_\_  
James E. Lake  
Registration No. 44,854  
Wells, St. John, et al  
601 W. First Avenue  
Suite 1300  
Spokane, WA 99201  
US-509-624-4276  
Customer No. 021567



Practitioner's Docket No. BA4-079

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Tonkyn, Russell, et al

Application No.: 09/960,124

Filed on: September 21, 2001

Title: No<sub>x</sub> Reduction Methods & Apparatuses

**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.27(a)(3)(ii)(C)--NONPROFIT ORGANIZATION**

I hereby state that I am a registered attorney of record appointed in compliance with 37 CFR 1.34(b):

Name of Nonprofit : Battelle Memorial Institute

Address of Nonprofit : 902 Battelle Boulevard  
P. O. Box 999  
Richland, Washington 99352

**TYPE OF NONPROFIT ORGANIZATION**

Nonprofit Scientific or Educational Under Statute of State of the United States of America.

Name of State: Ohio

Citation of Statute: Rev. Code of Ohio 1719.01 and 1719.05

I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR 1.27(a)(3), for purposes of paying reduced fees to the United States Patent and Trademark Office under Sections 41(a) and (b) of Title 35, United States Code, with regard to the invention described in the application identified above.

I hereby state that rights under contract or law have been conveyed to, and remain with, the nonprofit organization, with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. 1.27(a)(1), if that person made the invention, or by any concern that would not qualify as a small business concern under 37 CFR 1.27(a)(2), or a nonprofit organization under 37 CFR 1.27(a)(3).


(Small Entity-Non-Profit--page 1 of 2)

No such person, concern, or organization exists.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

Date: 21 Dec 2001

Signature

  
James E. Lake  
Reg. No. 44,854  
601 W. First Avenue  
Suite 1300  
Spokane, WA 99201  
USA



DEPT REF ROOM 307

Please type a plus sign (+) inside this box → ☐

OFFICE OF FINANCE

PTO/SB/21 (6-98)

Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b> 702 FEB -4 AM 10: 41 09/960,124
	<b>Filing Date</b> US PATENT & TRADEMARK OFFICE September 21, 2001
	<b>First Named Inventor</b> Russell Tonkyn
	<b>Group Art Unit</b> 1754
	<b>Examiner Name</b> Unknown
<b>Total Number of Pages in This Submission</b>	<b>Attorney Docket Number</b> BA4-079

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input checked="" type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Return Postcard Small Entity Statement
<b>Remarks</b> Customer No. 021567 The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. § 1.16 and § 1.17 and credit any overpayments to account no. 23-0925.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James E. Lake; Reg. No. 44,854; Wells, St. John, et al
Signature	
Date	21 Dec 2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 12/21/2001			
Typed or printed name	Gail Wright		
Signature		Date	12/21/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.